

**CASEFLOW REQUEST**

JD-CV-116 Rev. 1-16

**STATE OF CONNECTICUT****SUPERIOR COURT**

www.jud.ct.gov

**CSFLREQ****Instructions**

1. Fill out all sections and file with the court.
2. File at least 3 days before the date of the scheduled event.

**Note:** If the request is granted, the court will try to schedule the event for the requested date. However, if that date is not available, it will be scheduled for the next available date.

Name of case (First-named plaintiff v. First-named defendant)

**MIRLIS, ELIAHU v. YESHIVA OF NEW HAVEN, INC.**

Judicial District of

**New Haven**

Date of request

**09/27/2021**

Date of scheduled event (if applicable)

**09/27/2021**

Name of Judge who scheduled the event (if applicable)

Docket number

**NNH CV 17****- 6072389****(S)****Requested Action** ("X" box(es) that apply and give reason(s) for request below)

- ☐ Status Conference on or about: \_\_\_\_\_ Date \_\_\_\_\_
- ☐ Client/adjuster to be available by phone for \_\_\_\_\_ Event \_\_\_\_\_ scheduled on \_\_\_\_\_ Date \_\_\_\_\_
- ☐ Pretrial on or about \_\_\_\_\_ Date \_\_\_\_\_
- ☐ Party to be excused from \_\_\_\_\_ Event \_\_\_\_\_ scheduled on \_\_\_\_\_ Date \_\_\_\_\_
- ☒ Other: **Mark off and schedule hearing re Motion to Reset Law Day (Doc. No. 146)**

Reason(s) for request:

**The Plaintiff requests that the Court mark off the Motion to Reset Law Day and schedule a hearing for the week of October 12, 2021, and permit him until October 7, 2021 to file a reply to the Defendant's objection and motion for affirmative relief (Doc. No. 147). The Defendant's objection/motion was filed late Friday afternoon.**

I agree to notify my client and all counsel of record and self-represented parties whether the requested action is granted or denied, and if granted, the specific ruling of the court. I have told all counsel and self-represented parties of record that I would be asking for the requested action. **All Counsel and Self-represented Parties:**

- ☒ Consent ☐ Do not consent to the action requested above

Signed (Person making request)

**/s/John L. Cesaroni**

Name of attorney and juris number or self-represented party (Print or type)

**John L. Cesaroni - 069625**

The person requesting the action is the:

- ☐ Plaintiff ☐ Defendant ☒ Attorney for Plaintiff ☐ Attorney for Defendant

Firm name (If applicable)

**Zeisler & Zeisler, P.C.**

Address

**10 Middle St., 15th Floor, Bridgeport, CT 06604**

Telephone number (with area code)

**203-368-4234**

I certify that a copy of the above was mailed or delivered on the date shown below to all counsel and self-represented parties of record. A sheet is attached listing the name and address of each party the copy was mailed or delivered to.

Signed (Individual attorney or self-represented party)

**/s/John L. Cesaroni**

Date

**09/27/2021****Order**

Request is

- ☐ Granted ☐ Denied

Signed (Judge)

Date

**ADA NOTICE**

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at [www.jud.ct.gov/ADA/](http://www.jud.ct.gov/ADA/)

I certify that a copy of the foregoing Caseflow Request was sent to all appearing parties and counsel of record as follows via electronic mail on September 27, 2021:

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